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CARE-PACT mobile emergency assessment, care and treatment team

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۲ The ageing population presents a demand management challenge for modern health care systems. Emergency Departments (EDs) are often utilized as the gateway to medical care and are being increasingly faced with growing numbers of geriatric presentations and the risk of adverse events for Residential Aged Care Facility (RACF) residents'. Hospital transfers are often distressing for the residents and often contribute to high incidence of iatrogenic complications. In the current RACF model of care, there is often a failure to address the complex array of factors that influence staffs ability to care for patients in the facility with acute medical needs resulting in unplanned and avoidable presentations to ED. CARE-PACT (Comprehensive Aged Residents Emergency and Partners in Assessment, Care and Treatment) is a partnership between Residential Aged Care Facilities (RACFs), General Practitioners (GPs), primary care providers and the health and hospital service. The service aims to support GPs and RACF staff in the provision of best care for residents of RACFs with acute health care needs, in the most appropriate location. One component of the integrated care program, CARE-PACT, entails a mobile ED assessment, care and treatment team. This is operationally led by an emergency trained nurse practitioner, with further training and interest in geriatric medicine, with clinical governance held by the programs' dedicated ED physicians. This emergency substitutive care service and demand management program provides an ED equivalent assessment within the RACF. It aims to improve quality of emergency healthcare to this vulnerable geriatric population, whilst reducing exposure to the often frightening and high risk ED environment. The mobile ED assessment service reviews and manages RACF residents with selected acute healthcare needs in the residents' own environment. Outcome measures include but not limited to response time, hospital avoidance, KPIs on iatrogenic complications, cost saving and patient outcome, etc.

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